

# Harm Reduction: Public Health and Public Order

Evidence has shown that harm reduction services such as medication-assisted treatment, needle exchange, and safer injection facilities improve the health of drug users without increasing drug use. Yet in many countries, policymakers and the public wrongly believe that offering harm reduction services encourages crime. Numerous studies by international organizations, national governments, and public health institutions around the world have shown that harm reduction neither increases crime nor erodes public order. Indeed, harm reduction in the form of medication-assisted treatment has been shown to decrease criminal activities by illicit drug users.

## Medication-assisted Treatment

Medication-assisted treatment—one of the best studied and most effective forms of treatment for opiate dependence—uses prescription medicines such as methadone or buprenorphine to reduce injecting drug use by preventing cravings for street opiates like heroin.<sup>1</sup> In addition to reducing HIV transmission and other injection-related health problems,<sup>2,3</sup> medication-assisted treatment (also known as methadone maintenance treatment, substitution treatment, or substitution therapy) helps with social rehabilitation and reduces criminal activity.<sup>4</sup>

## EVIDENCE: International

- A 2004 paper by the World Health Organization (WHO), the United Nations Office on Drugs and Crime (UNODC), and the United Nations Joint Programme on HIV/AIDS (UNAIDS) noted that “Substitution maintenance therapy can decrease the high cost of opioid dependence to individuals, their families and society at large by reducing heroin use, associated deaths, HIV risk behaviours and criminal activity.”<sup>5</sup>

- According to WHO, UNODC, and UNAIDS, each dollar invested in opioid dependence treatment programs can yield savings of between \$4 and \$7 by reducing drug-related crime and criminal justice costs. When savings related to health care are included, total savings can exceed costs by a ratio of 12 to 1.<sup>6</sup>

## EVIDENCE: United States

- In 1989, the Treatment Outcome Perspective Study, a landmark evaluation of chemical dependence treatment in the United States, found that 32 percent of patients entering methadone maintenance treatment acknowledged committing one or more predatory crimes in the preceding year. Three to five years after leaving treatment, only 16 percent of patients reported such criminal activity, a 50 percent reduction.<sup>7</sup>
- A 1991 study in Baltimore, Philadelphia, and New York City showed that methadone programs in these cities corresponded with a 71 percent decline in crimes committed by participants. Patients in treatment for six years or more had the lowest incidence of crime.<sup>8</sup>



- A 2000 California study comparing medication-assisted treatment to detoxification and psychosocial therapy determined that methadone clients stayed in treatment twice as long those receiving the other therapies. Methadone patients also had lower rates of heroin use, fewer drug-related HIV risk behaviors, and nearly a 66 percent reduction in problems with the law.<sup>9</sup>
- A 2005 analysis of an alternative-sentencing policy for non-violent drug-offenders in California found that in the 30 months following entry into the program, opiate users in medication-assisted treatment had fewer felony or misdemeanor arrests than opiate users in other drug treatment programs.<sup>10</sup>

### EVIDENCE: Developing Countries

- Prior to enrolling in a methadone program, more than half of the patients in a drug treatment program in Bishkek, Kyrgyzstan, had criminal convictions. After one year of methadone maintenance, only 3 of 50 patients had new criminal convictions.<sup>11</sup>
- A 2007 evaluation of a two-year-old Albanian methadone program reported a decrease in criminal behaviors or disputes with the police in 95 percent of patients who had a history of legal problems.<sup>12</sup>
- A 2003 pilot methadone program in Malaysia reported that nearly two thirds (61 percent) of its patients said their employment situation had improved and that they had not engaged in crime or high-risk behaviors since starting methadone maintenance.<sup>13</sup>
- Preliminary results from a 2005 WHO assessment of methadone programs found that in Indonesia, patients' criminal activity dropped from 37 percent to 12 percent after six months of treatment. In Thailand, reports of criminal activity by methadone patients fell from 7 percent of patients to 2 percent in six months.<sup>14</sup>
- Self-reported rates of criminal behavior for clients in China's eight pilot methadone programs fell from 21 percent of clients at intake to 4 percent of clients after 12 months.<sup>15</sup>

### EVIDENCE: Australia

- An analysis of the criminal records of more than 11,000 methadone clients by officials in New South Wales revealed that for every 100 people in the methadone program for one year, New South Wales experienced 12 fewer robberies, 57 fewer burglaries, and 56 fewer motor vehicle thefts.<sup>16</sup>

### Syringe Exchange and Safer Injection Facilities

Needle and syringe programs, which provide sterile injection equipment to injecting drug users, are a cornerstone of harm reduction services. Numerous studies show that these programs reduce HIV transmission without encouraging drug use or criminal activity, and that they offer a bridge to additional health or treatment services.<sup>17,18</sup> Safer injection facilities where drug users are medically supervised reduce overdoses and health complications from injections and provide a route to further treatment without increasing criminal activity or public disorder.

### EVIDENCE: Worldwide

- In 2006, the Institute of Medicine, part of the U.S. National Academy of Science, reviewed dozens of studies in developed and developing countries and found no evidence that needle and syringe programs increased the number of publicly discarded needles or led to any increases in crime.<sup>19</sup> The analysis also noted that HIV prevention programs that included needle and syringe programs were associated with reductions in frequency of injection, needle sharing, and other HIV risk behaviors.
- A 2004 study of North America's first safer injection site, which opened in Vancouver in 2003, examined crime rates around the facility one year before and one year after the site's opening. The study found improvements in several measures of public order, including a reduction in the number of drug users injecting in public and used syringes on the streets and sidewalks.<sup>20</sup>

**Research and experience show that medication-assisted treatment and needle exchange are life-saving measures that do not increase crime or public disturbances. Medication-assisted treatment improves public safety by reducing the illicit drug dependence that can lead to theft and other crimes. Harm reduction programs are an effective, practical, and humane way of improving the health of both drug users and communities.**

## Notes

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